### Service Area Plan

#### Woodrow Wilson Rehabilitation Center

#### **Medical Rehabilitative Services**

#### Service Area Background Information

#### **Service Area Description**

This service area provides residential, on site outpatient and Community based medical rehabilitation services for individuals with functional limitations and physical disabilities. Services are available Ito consumers with an emphasis on work and independent living. Often, services are a component of a comprehensive package of vocational and medical rehabilitation services. Medical Rehabilitation Services is one service area of the Woodrow Wilson Rehabilitation Center (WWRC) a division of the Department of Rehabilitative Services (DRS). This area is certified as a CORF (Comprehensive Outpatient Rehabilitation Facility) and licensed to provide services by Medicare, Medicaid, Blue Cross/ Blue Shield, along with DRS and other payers.

## **Service Area Alignment to Mission**

This service directly aligns with WWRC's mission to provide persons with disabilities comprehensive individualized services, to realize optimal personal independence and employment.

## Service Area Statutory Authority

Section 51.5-14.7 of the <u>Code of Virginia</u> provides the statutory authority to operate and maintain WWRC as a facility to prepare individuals with disabilities for useful and productive lives, including employment, and to enable them to become, to the degree possible, self-sufficient.

The Appropriations Act Chapter 924 (1997) identifies the services WWRC is expected to provide.

This service area is subject to compliance to all conditions and

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limitations set forth by CORF (comprehensive outpatient rehabilitation facility) license and Medicare client provider standards (Part B by section 933 of the Omnibus Reconciliation Act 1980)

#### **Service Area Customer Base**

Customer (s)	Served	Potential
Medical Rehabilitation Service Area Clients	1,054	1,054
Clients Housed on the Short Term Rehabilitation Unit	149	149

#### **Anticipated Changes to Service Area**

The demand for community rehabilitation programs and community living options will continue to grow as people with significant disabilities move from institutional settings, such as nursing facilities, into local communities. The Supreme Court's Olmstead decision interpreted the Americans with Disabilities Act to require States to administer their services, programs and activities in the most integrated setting appropriate to the needs of qualified individuals. The Governor's Executive Orders 61 and 84 continue the Commonwealth's commitment to, and compliance with, the Olmstead decision through the Olmstead Implementation Team and the Olmstead Advisory Committee. WWRC's consumer referral base may grow due to these initiatives.

A study is currently underway to determine the needs of persons with disabilities whose condition is aggravated by substance abuse issues. Results of current work on this Commonwealth Neurotrauma Initiative Grant may result in an increase need to serve these clients.

WWRC is being requested to serve more clients with autism spectrum disorder. As the Center expands services to 18 to 22 year olds, this demand will increase. Needs of these clients vary and are individualized, programming and appropriate staffing will need to be coordinated with community resources and support vocational rehabilitation services.

As the center develops its continuum of Postsecondary Education Rehabilitation Transition (PERT) Program and Life Skills Program services, support services from the medical division will be needed. We anticipate a greater demand for medical and behavioral services and treatment plans.

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The increase in injured Veterans returning from the current war may place greater demands on resources. These post-war veterans are returning with brain and orthopedic injuries.

There is greater emphasis and advances in neuro-regenerative research for curing conditions like spinal cord injury. A growing referral base may occur for improving or preserving physical function in spinal cord injury clients in anticipation of curative interventions.

State and national emphasis on promoting healthier lifestyles to reduce costly medical complications of obesity will influence our client base. There may be an increased need to serve populations with disabilities that are also aging and/or obese.

### **Service Area Partners**

State and Federal Agencies: State and federal agencies and community-based service organizations serving individuals with disabilities partner with the WWRC for referrals; service coordination; joint grant initiatives and/or program development; and potential shared funding streams.

Families of Individuals with Disabilities: Critical partnerships with families of individuals with disabilities lead to recruitment of potential WWRC clients; potential (co)sponsorship that covers the cost of WWRC services; and community-based support for successful community re-entry.

#### **Service Area Products and Service**

Physical Therapy, Occupational Therapy, Speech and Language/Audiology Therapy and Behavioral Health are offered by way of evaluations, treatment intervention and education services on either a residential or outpatient basis. Using an interdisciplinary team approach coordinated by physician specialists and rehabilitation counselors, they provide comprehensive medical rehabilitation services. Some of the more notable services include, but are not limited to, adaptive driving, quantitative job demand and physical work performance evaluation, work hardening and conditioning, work site and ergonomic evaluations, comprehensive clinical psychological, neuropsychological, psycho-educational, and chemical dependency diagnostic evaluations, learning disability evaluations, disability determination evaluations, psychotherapy and aphasia, brain injury, orthotics, prosthetics, spinal cord and wheelchair clinics.

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Assistive Technology Services are available to adolescents and adults across the Commonwealth, with an emphasis on work and independent living. These services are provided by interdisciplinary Assistive Technology Teams. Major program areas are Computer Access, Communication, Seating and Mobility, Rehabilitation Engineering, and Home & School/Worksite Modifications.

The Short Term Rehabilitation Unit (STRU) at WWRC provides a residential living option for individuals with disabilities to receive comprehensive, client focused, outpatient rehabilitative services. This unit serves clients ages 18 and older who have participated in acute rehabilitation and have had time to psychologically and physically adjust to their disability. These medically stable clients often are more prepared to participate fully in goal setting, educational classes, medical therapies, driver's training, assistive technology and vocational assessments.

Ancillary services (Nursing, Lab, X-ray, and Pharmacy) are provided to support the residential clients and their comprehensive needs. A Durable Medical Equipment Program recommends and provides medical equipment and training on its use. Consistent with demand, mobile evaluation services and clinics are offered across Virginia.

# Factors Impacting Service Area Products and Services

Specialized therapy services, clinical expertise and technology are not readily available in all community based programs necessitating increasingly expensive mobile evaluation services.

Reductions to third party payors' reimbursement for services and individuals' ability to pay limit the referral base and restrict the provision of services.

Staff training, and non-traditional therapy modalities may not be medically reimbursed, reducing effectiveness of services and increasing costs. Greater trend towards the use of technology and durable medical equipment (DME) to improve quality of life and level of independence. A greater demand for these services will lead to greater cost.

## **Anticipated Changes To Service Area Products and Services**

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Greater trend towards the use of technology and durable medical equipment (DME) to improve quality of life and level of independence. A greater demand for these services will lead to greater cost.

Increased complexity and diversity of populations needing services will require more specialized staff and ongoing staff training.

Increased need to provide mobile services to specific parts of the State due to clients' inability to travel or lack of funding and/or transportation.

#### **Service Area Financial Summary**

The Medical Service Area is 18.7% general funds and 81.3% non-general funds. Of the non-general funds, all \$6.58 million is special funds provided for federal vocational rehabilitation services by DRS and reimbursement from insurance for medical services rendered to clients.

	Fiscal Year 2007		Fiscal Year 2008	
	<b>General Funds</b>	Nongeneral	General Funds	Nongeneral
		<b>Funds</b>		Funds
Base Budget	\$1,790,287	\$6,771,316	\$1,790,287	\$6,771,316
Changes to	\$192,209	\$378,986	\$192,209	\$378,986
Budget				
SERVICE	\$1,982,496	\$7,150,302	\$1,982,794	\$7,150,302
AREA				
TOTAL				

### Service Area Human Resources Summary

The Medical Services Area is staffed with 140.75 full-time and part-time salaried positions, wage positions and contract personnel. The service area is faced with a significant loss of personnel due to the aging workforce. At this time, over fifty percent of our salaried employees are age 50 or older. Fifteen percent of classified employees will be eligible to retire, with unreduced benefits, during the next five years. Approximately thirty-seven percent of our current classified workforce in the Medical Services Area is eligible for reduced retirement as of July 1, 2005.

## Service Area Force Workplace Breakdown

Effective Date	5/1/2005	
Total Authorized I	Position Levels	

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Vacant Positions	,
Non-Classified (Filled) 0	
Full-Time Classified (Filled) 114	
Part-Time Classified (Filled) 0.75	
Faculty (Filled) 0	
Wage 0	
Contract Employees	
Total Human Resource Level	15

#### Factors Impacting Service Area Human Resource

The majority of positions in the Medical Division are positions in occupational classifications which pose difficulty in recruiting applicants and retaining employees. Nursing personnel, Physical Therapists, Speech Therapists and Occupational Therapists are among those occupations which, according to the Bureau of Labor Statistics, the demand will increase during the next seven years. The projected percentage of employment change nationwide for each of these occupations is shown below:

Registered Nurses: 27.3% Physical Therapists: 35.3% Occupational Therapists: 35.2%

# **Anticipated Changes to Service Area Human Resource**

In order to be competitive in recruiting for positions such as Therapists and Nursing personnel, we will need to research and investigate both monetary and non-monetary incentives to attract applicants and retain employees.

A Workforce Planning initiative will address the loss of institutional knowledge from employee retirements and reduce the impact on the operation of critical agency functions as follows:

- Possible retention of retirees through mentorship or training positions;
- Identify and cross train critical functions of the agency;
- Succession planning;
- A student internship program with various colleges and universities; and
- Expanded use of telecommuting, alternate work schedules, and flexible work hours to attract and retain staff.

We will begin utilizing direct mail recruitment in our attempts to recruit licensed health care professionals. We have obtained VIPnet Access which

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allows Human Resource personnel to obtain names and addresses of licensed health care professionals in Virginia. We will be contacting appropriate professionals to make them aware of a position opportunity with our agency.

#### Service Area Objectives, Measures, and Strategies

### **Objective 45405.01**

To provide quality and effective medical rehabilitative services while meeting the needs of the client's within WWRC's residential programs and those in the community

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#### **This Objective Supports the Following Agency Goals:**

Deliver comprehensive and effective vocational services to citizens of the Commonwealth with disabilities that will realize their optimal independence and employability.

## This Objective Has The Following Measure(s):

Measure 45405.01.01

Number of Medical Rehabilitation Clients Served.

Measure Type: Output Measure Frequency: Annually

Measure Baseline: 1054 Clients Served

**Measure Target:** 1054

#### Measure Data Source and Calculation

WWRC maintains a data base of clients admitted and the services that they receive. A report of clients admitted will provide this measure.

## **Objective 45405.01.01 Has The Following Strategies:**

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- Improve assessment of client needs to optimize their successful participation in Center programs by collaborating with the client, family and referral source to identify medical and functional needs prior to admission to ensure appropriate resource allocation for each client, contributing to the development of criteria for assessing client life skills and functional training needs that support vocational and residential objectives of the client's admission and continuing collaboration across Center divisions to ensure effective coordination and utilization of resources.
- Maintain appropriate staffing levels with the necessary level of continuing education related to new client populations and maintain state-of-the-art treatment interventions by evaluating staff capacities related to client census, identifying staff training needs and capitalizing on continuing education opportunities.

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